

BEST AVAILABLE COPY

CLAIMS ONLY							Application Number 10-706144	Filing Date	
							Applicant(s)		
							* May be used for additional claims or amendments		
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT				
	Indep	Depend	Indep	Depend	Indep	Depend		Indep	Depend
1								51	/
2								52	/
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42								92	
43								93	
44								94	
45	/							95	
46		/						96	
47		/						97	
48		/						98	
49		/						99	
50		/						100	
Total Indep								Total Indep	
Total Depend								Total Depend	
Total Claims								Total Claims	